

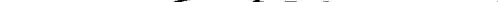
Substitute for Form 1449 A & B/PTO		Complete if Known	
INFORMATION DISCLOSURE STATEMENT BY APPLICANT <i>(use as many sheets as necessary)</i>		Application Number	09/770,279
		Confirmation Number	6249
		Filing Date	January 29, 2001
		First Named Inventor	Toshihiro SHIMA
		Art Unit	2174
		Examiner Name	Peng KE
		Attorney Docket Number	Q62411
Sheet	1	of	1

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Examiner Initials*	Cite No. ¹	Include name of the author (in CAPITAL LETTERS), title of the article (when appropriate), title of the item (book, magazine, journal, serial, symposium, catalog, etc.), date, page(s), volume-issue number(s), publisher, city, and/or country where published.	Translation ⁶

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